

DDRS Provider Webinar Sept. 20, 2012 Questions and Answers

Thank you to all who participated in the DDRS Provider webinar on Sept. 25, 2012 that covered Medicaid Waiver Changes to Case Management, Transportation, Structured Family Caregiving and Participants Assistance and Care (PAC). The Power Point presentation that accompanied the webinar can be found on the BDDS webpage, while answers to the questions posed during the webinar are listed below.

Please note that the Medicaid Waiver documents as well as all DDRS communications on this topic are posted on the DDRS website and contain all needed information with regard to service definitions, activities that may be reimbursed for each service, appropriate staffing ratios, etc. As approved providers of these services it is expected that you have reviewed and are familiar with those details.

Links for easy access to this information:

- [FSW and CIH Waiver documents](#)
- [The DDRS Waiver Manual is an additional resource guide](#)
- [Additional Case Management information](#)
- [HP Provider Information](#) and by calling 1-800-577-1278 or 1-877-707-5750

If you have additional questions that cannot be answered by the resources found above, please contact the BQIS Helpline at BQIS.Help@fssa.in.gov

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Case Management

- 1. We have to provide the CM's provider # on our RHS billings as the referring provider. How will this provider # be obtained if a new NOA is not issued? Will the company's provider # be shown along with the name of each CM company?**

Each case management company has been given the number to use. If they are uncertain, they should refer to their HP enrollment letter or contact HP. Please refer to the NOA for the referring number or ask the case management company.

- 2. Clarification on educating the consumer on choices of case management agencies? You stated guardians only?**

Individuals and their guardians can request a pick list. It is up to the guardian/individual and their representatives to interview and select a new case management agency.

- 3. Can you provide a list of supervisors or point of contact for each case management company?**

Please reference the DDRS' Announcement: [Case Management Providers](#) released on 8/24/2012 found on the DDRS' Announcements webpage.

- 4. Recently rec'd a new NOA showing IPMG as provider but it shows a different provider #. I thought IPMG would retain the same # for all their case managers.**

Each case management company has been given the number to use. If they are uncertain, they should refer to their HP enrollment letter or contact HP. Please refer to the NOA for the referring number or ask the case management company.

- 5. I know the slides during this webinar did not go over Initial Reporting but I thought I heard a reference in the beginning to this topic. My question relates to who completes an initial follow-up report? Is it the case mgr or RHS/day providers?**

Please reference the [Incident Reporting policy](#) on the DDRS' Policies webpage.

- 6. Can providers educate consumers on the case management choices?**

Individuals and their guardians can request a pick list. It is up to the guardian/individual and their representatives to interview and select a new case management agency.

- 7. Can providers of services request pick lists from BDDS?**

Individuals and their guardians can request a pick list. It is up to the guardian/individual and their representatives to interview and select a new case management agency.

- 8. Have letters been sent to Clients/guardians announcing the choice of Case management companies? How are consumers being notified about the option to change Case Management companies and how to go about doing it? Will there be a mailing to all service recipients informing them of the opportunity to choose a CM provider. Some guardians still do not know.**

No, the change has been announced during several public meetings and announcements, and DDRS Powerful Parents Meetings. The Arc has also assisted in getting the message out to individuals and families. At the next team meeting each waiver participant will be provided a pick list if they have not requested one prior.

Please refer to the following [DDRS Announcements](#) and webpages:

- Case Management Providers 8/24/12
- Qtrly Provider Meeting 7/6/2012
- Webinar Announcement 6/21/2012
- Case Management Provider Qualifications 6/7/2012
- [Webinar CIH Waiver, PowerPoint and Questions](#) 5/30/2012
- [Section 144 Report & FAQs](#)

- 9. Is there a person or body that will deal with complaints concerns or problem solving between providers and Case Management now that there are more than one entity and it is waiver based?**

There will be no change in the way the State provides oversight. Case Management providers as subject to IRs and Complaint investigations through BQIS just like any other waiver provider.

- 10. Will there be more than 4 CM providers certified?**

Like any other waiver services, any interested parties can submit an application at any time.

- 11. What are the names of the new case management companies again?**

Please reference the DDRS' Announcement: [Case Management Providers](#) released on Aug.24, 2012 found on the DDRS' Announcements webpage.

- 12. Why are there only three case management agencies listed on the pick list at this time?**

All providers are approved state wide; however, some case management companies do not have case managers available in every county. If there are not case managers available, they will not appear on that county's pick list.

13. Are any of the new case management companies serving Southern Indiana?

All providers are approved state wide; however, some case management companies do not have case managers available in every county. If there are not case managers available, they will not appear on that county's pick list.

14. Are the provider changes the same as CM changes in regards to 14 day transition time from date of signed pick list?

No, the transition policy for case management is strictly for case management.

15. When submitting waiver billings will every individual case manager's have a specific provider #. In the past IPMG had only one referring provider #.

Each case management company has been given the number to use. If they are uncertain, they should refer to their HP enrollment letter or contact HP. Please refer to the NOA for the referring number or ask the case management company.

16. Who is the point of contact if the 14 days has passed once the pick list has been signed?

Both case management companies will need to work with the team to establish the transition date.

17. Are there other CM companies in the process at this time?

Like any other waiver services, any interested parties can submit an application at any time

18. Will there be case management provider standards and documentation standards posted as part of the waiver manual?

Yes, please reference the [DDRS Waiver Manual](#), [Waiver documents](#) for standards, [DDRS Announcements](#) and the [DDRS Current Policies](#).

19. We are seeing many situations where an individual is in the process of choosing a new CM, but while the change is in process, it is not clear who their CM is. (For example, prior CM has left the original company, but team has had no communication from that company as to who new CM is, whether meetings are still happening, etc.) Suggestions for how to resolve?

Please use the case management company's communication protocol. Contact case manager's supervisor or director if you cannot resolve.

Transportation

Please note that Documentation Standards, required ratios, etc. have not changed for this service. Transportation under the FSW has not been changed. The relevant changes to this service under the CIH Waiver are: reimbursement is available for transportation to any non-medical appointments or destinations, addition of the 3 levels of service and reimbursement, the cost of the service is now outside of an individual's OBA budget and the ability to bill for reimbursement is no longer tied to whether the individual is receiving less than 35 hours of RHS. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation](#), DDRS' announcements "[PAC and Transportation](#)" and "[Changes to OBA Plan Year 3](#)" released on Aug. 24, 2012 and the CIH and FSW waivers on the [BDDS webpage](#).

20. Can a higher level request be retroactive to Sept 1?

Yes. The ISP must reflect a justification for the higher level.

21. Can transportation be used to a community job?

Yes, transportation can be used to access a community job.

22. Can transportation services be used to transport someone to a volunteer job which is completely independent with no staffing present?

Yes.

23. Regarding transportation, does that mean all new noas coming our way soon?

Yes, they are being updated by the Case Manager now.

24. For transportation the number of trips is fewer for those in levels 2 and 3. Will that be adjusted?

All levels allow two one-way trips per day. Level 1 reimbursement is \$5.00/per trip with an annual limit of \$2,500, Level 2 reimbursement is \$20.00/per trip with an annual limit of \$5,000 and Level 3 is \$40.00/trip with an annual limit of \$7,500. Please reference the DDRS' announcement "[PAC and Transportation](#)" released on Aug. 24, 2012.

- 25. Transportation Question - Level 2 rate will only cover 125 days of round trip with the cap being \$5000. Will there be any opportunity to add another round of Level 2 once the first 125 days are used up, especially if the person needs to come another 125 days of service to complete their year of service.**

Level 2 Transportation allows for 2 one-way trips per day at a rate of \$20.00 per trip and has an annual cap of \$5,000. Please reference the DDRS' announcement "[PAC and Transportation](#)" released on Aug. 24, 2012.

- 26. What are the documentation requirements for transportation?**

The documentation requirements for Transportation have not changed. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation](#).

- 27. Could you please re state the how the levels translate to algo levels in transportation?**

An individual's Transportation level is not tied to their Algo level. The Transportation level relates to the modifications necessary in order to safely transport an individual. Please reference the DDRS' announcement "[PAC and Transportation](#)" released on Aug. 24, 2012.

- 28. If a day service provider is already authorized for TRNO, will the TRNO be switched to the RHS provider?**

Yes. If the team meets before the update occurs, the team will determine the appropriate Transportation provider.

- 29. Is transportation a 3 month prior authorization for use?**

Yes.

- 30. For the Family and Supports Waiver does the transportation come out of the \$16,250 limit?**

Yes. Transportation under the FSW has not been changed. Please reference the FSW on the [BDDS webpage](#).

- 31. How will transportation be added to the family supports waiver?**

Transportation is already a service under the FSW. Please reference the FSW on the [BDDS webpage](#).

- 32. Transportation Question - CIH waiver clients are being billed under RHS for their face-to-face time to be transported to and from day service, can Transportation also be billed on top of this time?**

Not by the same staff person. One staff person cannot bill for two services simultaneously. The staff person providing Transportation would bill Transportation. If an RHS staff person is accompanying a consumer and they are providing an approved RHS activity, yes they can bill RHS.

- 33. If a bus pass is used what is the required documentation standard?**

Transportation Documentation standards have not been changed. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation.](#)

- 34. Will a copy of bus pass meet transportation documentation standard?**

Transportation Documentation standards have not been changed. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation.](#)

- 35. Can transportation be provided to multiple consumers in the same vehicle at the same time and each consumer billed for transportation level I?**

Yes.

- 36. Can the RHS provider bill for RHS or CHIO at the same time which they bill for Transportation service?**

If an RHS staff person is accompanying a consumer and they are providing an approved RHS activity, yes they can bill RHS.

- 37. What is the justification to request a round trip?**

A round trip is allowed with no additional justification required. Justification is required for an increase in level of service.

- 38. Transportation Question - Where will I be able to find in writing the ability to now bill transportation to take someone to and from their community job?**

There is no restriction with regard to the destination. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation.](#)

39. Transportation Question - If an agency is doing Community Individual for a client when they are out in the community, and then they deliver that person to their home at the end of the outing. Can they then bill transportation when they are on the way back to the agency without the client in the car or van?

No.

40. There has been a lot of confusion lately and I wanted to make sure the proper documentation is being completed.

Transportation Documentation requirements have not changed. Please reference the [DDRS Waiver Manual: Section 10.29: Transportation.](#)

41. If a company serves a client for Day Services and RHS services can Day Services bill to transportation for 3 days a week, and RHS bill to transportation for 2 days a week until the cap is reached?

Yes.

42. We had some individuals where transpo added to new plan starting for example 11/1/12; does this mean that BDDS is requesting that the cm go back to the plan for 9/1/12 to 10/31/12 to add the level one service?

If the Transportation was needed and actually provided, it may be added as of Sept.1, 2012.

43. How do you know what transportation level you fall under? and who decides level?

Please reference the DDRS' announcement "[PAC and Transportation](#)" released on Aug. 24, 2012.

44. I understand that you get up to two trips per day that can be billed; does that only count for travel to and from day service? No. What about activities in the community later in the day or appointments? Transportation to any activities in the community is allowed. There is no restriction based on the destination except that it must be a non-medical appointment.

45. Are we allowed to bill RHS for transportation trips after the two initial billed ones?

You are allowed to bill RHS when staff performs an RHS Allowed Activity. Please reference the CIH on the [BDDS webpage.](#)

46. If a company provides both Day Services and Residential services to a client can both departments bill Transportation as long as they are not billing for more than 2 trips a day?

Yes.

47. If you are transporting multiple consumers, can some be billed transportation and some RHS services?

You must be providing the service if you are billing for it. If a staff person is actually providing RHS service, then you may bill for it.

48. The waiver manual still denotes that transportation is not allowable if more than 35 hours of rhs per week is received, will this be modified?

Yes, the manual is being updated. There is no longer a restriction with regard to individuals receiving more than 35 RHS hours a week.

49. Transportation - if a client uses travel vouchers (New Freedom Vouchers) and an attendant (RHS employee) rides for free to provide staffing, can the attendant be billed for RHS and the voucher cost be reimbursed by TRNO?

If the “attendant” is providing RHS, then yes, you can bill RHS.

50. I thought it was noted that ago levels do not relate to the transportation level? That is correct. I recall the comparison of Algo 0-1= level 1. Algo 2=level 2. and Algo 3-6=level 3. No, that is not correct. Is this correct and are current Algo levels already factored in to the appropriate transportation level? ex. Algo 5 would = transportation level 3? Sorry just need clarification. Transportation level is not related to Algo level. Please reference the DDRS’ announcement “[PAC and Transportation](#)” released on Aug. 24, 2012 and the CIH on the [BDDS webpage](#).

51. Why does case managers say that we have to have transportation in the plan even when the team indicates it is not needed?

If the service is not needed, the team can decide to remove it.

52. ...a driver and a RHS staff...can both services be billed?

One staff cannot bill for two services at the same time. If one staff is driving and one staff is providing the service of RHS, yes one staff would bill Transportation and one staff would bill RHS.

53. So does that your statement mean you cannot have an RHS staff accompany a consumer on a van who has very difficult behaviors and bill for both RHS services and Bill Transportation at the same time...if this is the only way he or she can ride a van to and from work?

Please see above response. The same staff person cannot bill two services at the same time. If an RHS staff person is accompanying a consumer and they are providing an approved RHS activity, yes they can bill RHS.

54. If a day service provider is already authorized for TRNO, will TRNO be automatically switched to the RHS provider?

Yes, unless the team meets before the case manager does the update.

55. It is understood that you cannot bill for a service without the consumer being present, however, with transportation, could consumer's use transportation to purchase a bus pass and ride public transport independently?

Yes, that is allowed.

56. If you already meet the minimum of two trips per day with a consumer, is the total dollar number already factored into their plan? ex. \$2,500 for level 1 per year?

Transportation reimbursement is allowed for a MAXIMUM of two one-way trips per day. There are three (3) levels of Transportation. Level 1 has a limit of \$2,500/yr, Level 2 has a limit of \$5,000/yr and Level 3 has a limit of \$7,500 per year. This service cost is outside of an individual's OBA allocation.

57. If a company provides both Day Services and Residential services to a client can both departments bill Transportation as long as they are not billing for more than 2 trips a day?

Yes.

58. What if the Day service provider is only going to use 1/2 of the TRNO... can another provider access the rest?

Yes. Of course though, you must be listed as a provider of record.

59. What is the staff ratio for transportation services?

There is no required ratio. Please reference the CIH on the [BDDS webpage](#).

60. Please explain how transportation and RHS are "like" services? For example, RHS and BMAN can be billed concurrently and share more similarities than RHS and transportation.

One staff person cannot bill two services for the same time frame. The staff person cannot be providing Transportation and at the same time be providing an approved activity of RHS.

61. If you only have one staff with one consumer, how would you ever be able to bill transportation?

One staff person cannot bill two services for the same time frame. The staff person cannot be providing Transportation and at the same time be providing an approved activity of RHS.

Structured Family Caregiving

62. How will Day Services be provided for Structured Family Caregiving?

Just as they were able to when this service was called Adult Foster Care. Individuals are able to access Day Services in addition to Structured Family Caregiving.

63. The new structured family caregiver definition states that there is a required daily electronic note that can be accessed by the state. By what mechanism is this to be done, and why is the electronic documentation requirement unique only to this service?

At this time, the documentation requirements remain unchanged, but the addition of this language to the service definition is a reflection of the state's desire to move toward electronic documentation which will be further developed and announced in the near future.

64. What resource did you cite in regard to the new rule on more than 1 level 3 livings in the same SFC home?

This is no longer a restriction. Please reference the CIH on the [BDDS webpage](#).

65. Currently in Adult Foster Care a level 3 client cannot live with another level 3 client, is this going to change with the new structured family caregiving?

Yes. That restriction has been removed.

Participant Assistance and Care (PAC)

66. Is it correct that PAC is not a goal driven service?

That is correct.

67. I am case manager and I don't know where to put PAC on the ISP. Please help.

It should be listed in Meeting Issues and Requirements. If you are a case management provider please remember to submit questions using Advocare Assist as previously instructed.

68. Why would PAC be listed as an outcome on the ISP, when it is not goal related? Could it be in meeting and requirements?

Yes, it should be listed similarly to Respite. If you are a case management provider please remember to submit questions using Advocare Assist as previously instructed.

69. Since PAC service doesn't relate to a measurable outcome, where does it go on the ISP?

It should be listed in Meeting Issues and Requirements. If you are a case management provider please remember to submit questions using Advocare Assist as previously instructed.

70. Are you saying that PAC and RHS services can be pooled and provided by one staff to multiple consumers?

If they are providing service activities under PAC and RHS that are the same, yes they can share.

71. Will Service Definitions be sent out for PAC?

The service definition for this service is available in the FSW document on the [BDDS webpage](#).

72. Must PAC be provided at home or may it be provided at other places?

There is no requirement that it must be provided in the home, PAC may be provided in places other than the home.

73. Is PAC only a one to one ratio service?

There is no required ratio for PAC service. The service definition for this service is available in the FSW document on the [BDDS webpage](#).

74. Completion of task list” is listed as a reimbursable service for PAC. I haven’t been able to find anything that provides details about what this is exactly. Is there anything that we could reference that would provide details about what this is or what is required from providers?

It is a listing of competed tasks. It is expected that such a list be used for planning as well as documentation. A [sample](#) of one can be found on the [BDDS webpage](#).

75. Can you please explain exactly what a task list is?

It is a listing of competed tasks. It is expected that such a list be used for planning as well as documentation. A [sample](#) of one can be found on the [BDDS webpage](#).

76. In the future will PAC be added to the CHI waiver?

There are no plans to add it at this time.

77. Within the service definition for PAC, it states that assistance with various activities is reimbursable, “excluding the provision of transportation.” Does this mean that anytime staff transports an individual it is not reimbursable?

No. It means that for this service, you cannot bill PAC if you are actually providing Transportation. If a staff person is transporting an individual, then the appropriate reimbursement would be to bill Transportation.

78. Will you explain how RHS hours for a CIH client can share hours with a PAC client on the FSW?

If they are providing service activities under PAC and RHS that are the same, yes they can share.

79. Are existing providers grandfathered to be PAC providers?

Current RHS providers are qualified to provide PAC service, but they must contact DDRS Provider Relations and request to have the service added. Please reference the DDRS’ announcement “[PAC and Transportation](#)” released on Aug. 24, 2012.

80. Are existing providers required to apply to be PAC providers?

Current RHS providers are qualified to provide PAC service, but they must contact DDRS Provider Relations and request to have the service added. Please reference the DDRS' announcement "[PAC and Transportation](#)" released on Aug. 24, 2012

81. How would you bill for a shared staffing setting for one client using PAC services and one using RHSO service if they live together?

If they are providing service activities under PAC and RHS that are the same, yes they can share.

82. Who is the contact person if a provider wants to be a PAC provider?

The Director of DDRS Provider Relations is Beth Goodrich. She may be reached at Beth.Goodrich@fssa.in.gov

Miscellaneous

83. Will waiting list dates for clients who have been waiting for DD and autism waivers be honored for CIH waivers or only family support services?

This was previously explained in detail during CIH webinar on May 30, 2012. A recording of the webinar and a Q&A is posted on the [BDDS webpage](#)

84. Will providers have access to know when/if CCBs have been submitted?

Yes, providers will continue to receive CCB Activity Notices as CCBs are submitted to the State.

85. What if the client is on the A&D waiver, how will they access the CIH waiver if they are eligible for both?

This was previously explained in detail during CIH webinar on May 30, 2012. A recording of the webinar and a Q&A is posted on the [BDDS webpage](#).

86. How do we bill these services? What are the documentation standards if any for billing and providing these services?

Information regarding provider billing procedures are covered at www.indianamedicaid.com and the [DDRS Waiver Manual: Section 2.4: Claims and Billing](#)

Documentation standards for Medicaid Waiver services are available in the [DDRS Waiver Manual: Section 10.29: Transportation.](#) Please note that no changes have been made to Documentation Requirements for any services.

87. What happened with the consumers who were at the top of the waiting DD Waiver waiting list? Were they targeted for the FSW?

This was previously explained in detail during CIH webinar on May 30, 2012. A recording of the webinar and a Q&A is posted on the [BDDS webpage](#)

88. Concerning the CIH waiver. Does this mean that clients currently living in Group Homes who have been on the waiver waiting list cannot receive CIH waivers?

This was previously explained in detail during CIH webinar on May 30, 2012. A recording of the webinar and a Q&A is posted on the [BDDS webpage](#)

89. If a consumer on the CIH Waiver does not have enough RHSS hours can they be moved to the FSW to receive PAC?

The consumer could apply for and be put on the waitlist for the FSW and then wait to be targeted for services.